15-02-07

PTO/SB/17 (04-07)

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Date April 30, 2007

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| 8 pursuant to th   | Complete if Known   |                                   |                       |                        |  |          |                       |                |  |
|--|---|-----------------------------------|-----------------------|------------------------|--|----------|-----------------------|----------------|--|
| B The pursuant to the  |   | Jophauons A                       | LTT A I               | Applicati              | on Number                                  | 10/617,0 | 003                   |                |  |
| FEE  | Filing Da   | ite                               | July 10,              | 10, 2003               |  |          |                       |                |  |
|  | First Nar   | med Inventor                      | Louis Kovach          |                        |  |          |                       |                |  |
| Annliannt ala  | Examine   | r Name                            | Robert J. McCarr      |                        | y Jr.                                      |          |                       |                |  |
| Applicant cla  | Art Unit  | Art Unit 3617                     |                       |                        |  |          |                       |                |  |
| TOTAL AMOUNT OF PAYMENT (\$) 100.00  |   |                                   |                       |                        | Attorney Docket No. 510685-151 (69010-263) |          |                       | 10-263)        |  |
| METHOD OF PAYMENT (check all that apply)   |   |                                   |                       |                        |  |          |                       |                |  |
| Check Credit Card Money Order None Other (please identify): Charge to Deposit Account  |   |                                   |                       |                        |  |          |                       |                |  |
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| under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. |   |                                   |                       |                        |  |          |                       |                |  |
| FEE CALCULATION  |   |                                   |                       |                        |  |          |                       |                |  |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES  |   |                                   |                       |                        |  |          |                       |                |  |
| FILING FEES SEARCH FEES EXAMINATION FEES   |   |                                   |                       |                        |  |          |                       |                |  |
| Application T  | <u>ype Fee</u>  | <u>Smali (</u><br>(\$) <u>Fee</u> | <del></del>           | <u>Small E</u><br>(\$) |  |          | Entity<br>(\$)        | Fees Paid (\$) |  |
| Utilitý  | 300   |                                   |                       |                        |  |          |                       |                |  |
| Design   | 200   | 0 100                             | 100                   | 50                     | 13   | 0 6      | 5                     |                |  |
| Plant  | 200   | 0 100                             | 300                   | 150                    | 16   | 0 8      | 0                     |                |  |
| Reissue  | 300   | 0 150                             | 500                   | 250                    | 60   | 0 30     | 0                     |                |  |
| Provisional  | 200   | 0 100                             | 0 0                   | •                      |  | 0        | 0                     |                |  |
| 2. EXCESS CLAIM FEES Small Entity  |   |                                   |                       |                        |  |          |                       |                |  |
| Fee Description  |   |                                   |                       |                        |  |          | <u>see (\$)</u><br>50 | Fee (\$)<br>25 |  |
| Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)   |   |                                   |                       |                        |  |          | 200                   | 100            |  |
| Multiple dependent claims  |   |                                   |                       |                        |  |          | 360                   | 180            |  |
| Total Claims   |   |                                   |                       |                        |  |          |                       | pendent Claims |  |
|  | 0 or HP =   | x                                 |                       |                        |  | <u>F</u> | ee (\$)               | Fee Paid (\$)  |  |
| HP = highest nun<br>Indep. Claims  | mber of total claims  | paid for, if gre<br>Claims        |                       | ee Paid (\$)           |  |          |                       |                |  |
| - 3  | or HP =   | x                                 |                       | ## Falu (#/            |  |          |                       |                |  |
| HP = highest number of independent claims paid for, if greater than 3.   |   |                                   |                       |                        |  |          |                       |                |  |
| 3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer   |   |                                   |                       |                        |  |          |                       |                |  |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50  |   |                                   |                       |                        |  |          |                       |                |  |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  |   |                                   |                       |                        |  |          |                       |                |  |
| <u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>   |   |                                   |                       |                        |  |          |                       |                |  |
| 100 = / 50 = (round <b>up</b> to a whole number) x =   |   |                                   |                       |                        |  |          |                       |                |  |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)  |   |                                   |                       |                        |  |          |                       |                |  |
| Other (e.g.,   | late filing surc  | harge): Ad                        | ditional Claims Filin | ig Fees                |  |          |                       | \$100.00       |  |
| SUBMITTED BY Q A //  |   |                                   |                       |                        |  |          |                       |                |  |
| Signature  | Registration No. (Attorney/Agent) 34,549 Telephone 213-430-7424 |                                   |                       |                        |  |          |                       |                |  |
|  | 1 / 1   |                                   |                       | ( titorney/            | gone                                       |          | <u></u>               |                |  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Brian M. Berliner